9-27-05 EV698744086

PTO/SB/21 (08-03)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/902.810 Filing Date 7/10/2001 TRANSMITTAL First Named Inventor Anders Hejlsberg et al. **FORM** Group Art Unit 2191 r all correspondence after initial filing) **Examiner Name** Rampuria, Satish Attorney Docket Number MS1-865US Total Number of Pages in This Submission ENCLOSURES (check all that apply) X Fee Transmittal Form Drawing(s) After Allowance Communication to Group Fee Attached Licensing-related Papers Appeal Communication to Board Petition X of Appeals and Interferences Amendment / Reply Petition to Convert to a Appeal Communication to Group After Final **Provisional Application** (Appeal Notice, Brief, Reply Brief) Power of Attorney, Revocation Affidavits/declaration(s) Proprietary Information Change of Correspondence Extension of Time Request Status Letter Address **Express Abandonment Request** Terminal Disclaimer Other Enclosure(s) (please Information Disclosure Statement identify below): Request for Refund Declaration under 37 CFR 1.131 Certified Copy of Priority CD, Number of CD(s) Return Receipt Postcard **Documents** Response to Missing Parts/ Incomplete Application Remarks Response to Missing Parts under 37 CFR 1.52 or 1.53 22801 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Allan T. Sponseller/Reg. No. 38318 Individual Name Signature Date September 26, 2005 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name LeAnn M. Sassman Signature Date

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PTO/SB/17 (12-04)

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2004.		0)	Complete if Known			
Fees pursuant to the Consolided Appropriations Act, 2005 (H.R. 4818).		Application Num	ber 09/902	09/902,810		
FEE TRANSMITTAL		Filing Date	7/10/20	7/10/2001		
For FY 2005		First Named Inve	entor Anders	Anders Hejlsberg		
Applicant stains amall antity status Sec. 27 CED 1.27		Examiner Name	Rampu	Rampuria, Satish		
Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2191	2191		
TOTAL AMOUNT OF PAYMENT	(\$) 120.00	Attorney Docket	No. MS1	- 865US		
METHOD OF PAYMENT (check all that apply)						
Check Credit Card Money Order None Other (please identify):						
Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments						
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
•	ING FEES SE	ARCH FEES	EXAMINATIO			
Application Type Fee	Small Entity (\$) Fee (\$) Fee	Small Entity e (\$) Fee (\$)		I <u>II Entity</u> ee (\$)	Fees Paid (\$)	
Utility 300		<u> </u>		100		
Design 200			130	65 -		
: Plant 200			160	80 _	·	
Reissue 300	150 50		600	300 -		
Provisional 200	100	0 0	0	0 -		
2. EXCESS CLAIM FEES		-			Small Entity	
Fee Description Fee (\$) Fee (\$) Fee (\$) Fee (\$)						
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100						
Multiple dependent claims 360 180						
Total Claims Extra C		ee Paid (\$)	Multiple Depe	ndent Claims		
- 20 or HP = HP = highest number of total claims page	x =		Fee (\$)	Fee Paid ((<u>\$)</u>	
Indep. Claims Extra C	· · · · · ·	ee Paid (\$)				
- 3 or HP =	x 200 =					
HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE						
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)						
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)						
100 = / 50 = (round up to a whole number) x =						
4. OTHER FEE(S) Non English Specification \$120 for (no small antity discount)						
Non-English Specification, \$130 fee (no small entity discount) Other: One-Month Extension of Time						
Other: One-Month Extension	on or time				120.00	
UBMITTED BY						

Registration No. Telephone (509) 324-9256 Signature 38318 (Attorney/Agent) Date 9 Name (Print/Type) Allan T. Sponseller 26/05

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